Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|--|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on | Mildred | |
| | your government-issued picture identification (for | First name | First name |
| | example, your driver's | C. | |
| | license or passport). | Middle name | Middle name |
| | Bring your picture | Zimmerman | |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | 3 | | |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal | | |
| | Individual Taxpayer Identification number (ITIN) | xxx-xx-5420 | |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 2 of 48

Debtor 1 Mildred C. Zimmerman

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|----|--|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs | | |
| 5. | Where you live | 140 Glen Road, Apt. #1 Rockford, IL 61103 | If Debtor 2 lives at a different address: | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Winnebago County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |

Entered 12/16/15 10:41:35 Page 3 of 48 Desc Main Case 15-83097 Doc 1 Filed 12/16/15 Document

Debtor 1 Mildred C. Zimmerman

Case number (if known)

| Par | Tell the Court About | our Ba | ankruptcy Ca | ise | | | |
|--|---|----------------|--|---|---|---|---------------------------|
| 7. | The chapter of the Bankruptcy Code you are | Check (Form | | | of each, see <i>Notice Required by</i> page 1 and check the appropria | 11 U.S.C. § 342(b) for Individuals Filing for Ban te box. | kruptcy |
| | choosing to file under | ■ Cł | napter 7 | | | | |
| | | ☐ Ch | napter 11 | | | | |
| | | ☐ Ch | napter 12 | | | | |
| | | ☐ Ch | napter 13 | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typio attorney is subm | cally, if you are paying the fee yo | ck with the clerk's office in your local court for mourself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or control of the court of | , or money |
| ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Indi The Filing Fee in Installments (Official Form 103A). | | | | on, sign and attach the Application for Individua | ls to Pay | | |
| | | _ | I request that but is not req that applies t | at my fee be waiv uired to, waive yo o your family size | ved (You may request this option our fee, and may do so only if you and you are unable to pay the | n only if you are filing for Chapter 7. By law, a ju our income is less than 150% of the official pove fee in installments). If you choose this option, you Official Form 103B) and file it with your petition. | erty line ou must fill |
| | | | out the Appli | cation to Have th | e Chapter I I lling I ee walved (| Omolari omi 1000) and lie it with your petition. | |
| Э. | Have you filed for bankruptcy within the last 8 years? | ■ No | | | | | |
| | iast o years: | L TE | S. District | | When | Case number | |
| | | | District | | When | Coop number | |
| | | | District | | When | Case number | |
| | Ana any handanyatay | | | | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Ye | S. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | □ No | . Go to I | ine 12. | | | |
| | | ■ Ye | s. Has yo | our landlord obtain | ned an eviction judgment agains | st you and do you want to stay in your residence | ? |
| | | | | No. Go to line 1 | 2. | | |
| | | | | Yes. Fill out <i>Init</i> bankruptcy petit | | Judgment Against You (Form 101A) and file it w | vith this |
| | | | | | | | |

|)eb | tor 1 | Case 15-8 Mildred C. Zimmerr | | Doc 1 | Filed 12/16/15 Document | Entered 12/16/15 10:41:35 Page 4 of 48 Case number (if known) | Desc Main |
|-----|------------------------------------|--|------------|---------------------|---|---|-------------------------------------|
| art | 3: | Report About Any Bus | sinesses Y | ou Own as | a Sole Proprietor | | |
| 2. | of an | ou a sole proprietor y full- or part-time ness? | □ No. | Go to Pa | art 4. | | |
| | | | Yes. | Name ar | nd location of business | | |
| | busin an ind separ as a d | e proprietorship is a less you operate as dividual, and is not a rate legal entity such corporation, | | | e b/d/a Millie Zimmerm business, if any | nan | |
| | • | ership, or LLC. I have more than one | | | en Road, Apt. #1 | | |
| | sole p | oroprietorship, use a | | | d, IL 61103 Street, City, State & ZIF | P Code | |
| | | rate sheet and attach his petition. | | | ne appropriate box to des | | |
| | | | | ■ + | lealth Care Business (as | defined in 11 U.S.C. § 101(27A)) | |
| | | | | | Single Asset Real Estate | (as defined in 11 U.S.C. § 101(51B)) | |
| | | | | | Stockbroker (as defined in | n 11 U.S.C. § 101(53A)) | |
| | | | | | Commodity Broker (as de | fined in 11 U.S.C. § 101(6)) | |
| | | | | <u> </u> | lone of the above | | |
| 3. | Chap Bank | small business | deadlines. | If you indic | cate that you are a small statement, and federal in | ust know whether you are a small business de business debtor, you must attach your most r ncome tax return or if any of these documents | ecent balance sheet, statement of |
| | For a | definition of small | ■ No. | I am not | filing under Chapter 11. | | |
| | busin | ess debtor, see 11 C. § 101(51D). | □ No. | I am filin Code. | g under Chapter 11, but | I am NOT a small business debtor according | to the definition in the Bankruptcy |
| | | | ☐ Yes. | I am filin | g under Chapter 11 and | I am a small business debtor according to the | definition in the Bankruptcy Code. |
| art | t 4 : | Report if You Own or | Have Any | Hazardous | Property or Any Prope | rty That Needs Immediate Attention | |
| 4. | - | ou own or have any | ■ No. | | | | |
| | | erty that poses or is | | | | | |

of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Page 5 of 48 Document

Debtor 1 Mildred C. Zimmerman Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| About Debtor 2 | (Spouse | Only in a | Joint Case) |
|----------------|---------|-----------|-------------|
|----------------|---------|-----------|-------------|

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if anv.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Page 6 of 48 Document Case number (if known) Debtor 1 Mildred C. Zimmerman Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1** 25,001-50,000 **1**,000-5,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000

How much do you estimate your liabilities to be?

be worth?

□ \$50,001 - \$100,000

\$0 - \$50,000

\$100,001 - \$500,000

□ \$100,001 - \$500,000

□ \$500,001 - \$1 million

- □ \$500,001 \$1 million

□ \$1,000,001 - \$10 million

□ \$50,000,001 - \$100 million

□ \$100,000,001 - \$500 million

- □ \$10,000,001 \$50 million
- □ \$50,000,001 \$100 million □ \$100,000,001 - \$500 million

□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion

□ \$10,000,000,001 - \$50 billion

- □ \$10,000,000,001 \$50 billion
- ☐ More than \$50 billion

☐ More than \$50 billion

Sign Below Part 7:

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Mildred C. Zimmerman

Mildred C. Zimmerman Signature of Debtor 1

Executed on

Signature of Debtor 2

Executed on December 8, 2015

MM / DD / YYYY

MM / DD / YYYY

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 7 of 48

Debtor 1 Mildred C. Zimmerman Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Jeffry A Dahlberg | Date | December 8, 2015 |
|--|---------------|--------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Jeffry A Dahlberg Printed name | | |
| Balsley & Dahlberg Firm name | | |
| 5130 North Second Street Loves Park, IL 61111 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (815) 877-2593 | Email address | www.balsleylawoffice.com |
| 6206776 | | |
| Bar number & State | | |

| | | Ducum | TIL FAUE O UL 40 | |
|--------------------|--------------------------|-------------------|------------------|--------------------------------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Mildred C. Zimmer | rman | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| if known) | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t1: Summarize Your Assets | | |
|-----|--|--------------|--------------------------|
| | | Your as | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 4,425.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 4,425.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 16,200.46 |
| | Your total liabilities | \$ | 16,200.46 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,195.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,245.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | our other so | chedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 9 of 48

Debtor 1 Mildred C. Zimmerman Document Page 9 of 48 Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$ 787.14 |
|----|--|--------------|
| | | |

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Page 10 of 48 Document Fill in this information to identify your case and this filing: Debtor 1 Mildred C. Zimmerman Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number ☐ Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chrylser Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Seabring Model ■ Debtor 1 only Creditors Who Have Claims Secured by Property. 2004 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 121,000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$1,625.00 \$1,625.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here......>>

\$1,625.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property page 1

| De | btor 1 | Mildred C. Z | Document Page 11 of 48 | Case number (if known) | Desc Main |
|------------|---|--|---|---------------------------|---|
| | | - Millarda G. E | | | |
| | Yes. | Describe | Misc. household goods and furnishings, 1 television | | \$1,900.00 |
| | | | | | |
| | Electroi Exampi ■ No | es: Televisions | and radios; audio, video, stereo, and digital equipment; computers, prir I phones, cameras, media players, games | nters, scanners; music o | collections; electronic devices |
| | | Describe | | | |
| 8. | | | I figurines; paintings, prints, or other artwork; books, pictures, or other ons, memorabilia, collectibles | art objects; stamp, coin | n, or baseball card collections; |
| | ☐ Yes. | Describe | | | |
| | Example No | ent for sports a les: Sports, phot musical inst | ographic, exercise, and other hobby equipment; bicycles, pool tables, g | golf clubs, skis; canoes | and kayaks; carpentry tools; |
| | ■ No | | s, shotguns, ammunition, and related equipment | | |
| | Clothe Examp | | othes, furs, leather coats, designer wear, shoes, accessories | | |
| | | Describe | | | |
| | — 103. | Describe | Clothing and personal items | | \$600.00 |
| 13. 14. | ■ No □ Yes. Non-fa Examp ■ No □ Yes. Any ot ■ No □ Yes. | Describe Irm animals Describe Describe Describe her personal an | d household items you did not already list, including any health a | aids you did not list | |
| | for Pa | | number here | | \$2,500.00 |
| | | | egal or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examp ■ No | oles: Money you | have in your wallet, in your home, in a safe deposit box, and on hand | when you file your petiti | ion |

Official Form 106A/B Schedule A/B: Property page 2

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 12 of 48 Case number (if known) Debtor 1 Mildred C. Zimmerman 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Woodforest Bank \$300.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Nο ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: **IMRF** State of Illinois Retirement Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them...

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

■ No

27. Licenses, franchises, and other general intangibles

| | Case 15-830 | | Filed 12/16/15 Document | Page 13 o | 12/16/15 10:41:35 f 48 | Desc Main |
|--|---|--|--|--|--|---|
| Debtor 1 | Mildred C. Zimme | erman | | | Case number (if known) | |
| Money | or property owed to yo | u? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | | tion about them, inc | cluding whether you alre | eady filed the ret | urns and the tax years | |
| Exai ■ No | | | usal support, child supp | ort, maintenance | e, divorce settlement, propert | y settlement |
| Exai ■ No | benefits; unpaid | lisability insurance loans you made to | | efits, sick pay, v | acation pay, workers' compe | ensation, Social Security |
| 31. Inter | ests in insurance policing | cies | nealth savings account (| HSA); credit, ho | meowner's, or renter's insura | ınce |
| | s. Name the insurance o | company of each p Company name: | olicy and list its value. | Ber | neficiary: | Surrender or refund value: |
| | | Protective Term cash value | Life Insurance Policy | G. | exis R. Pollack, Corrine Bevardi, Jay M. Clark, Iliam J. Clark | \$0.00 |
| If yo | interest in property that u are the beneficiary of eone has died. | | | | or are currently entitled to rec | ceive property because |
| ☐ Ye 33. Clair Exal No ☐ Ye 34. Othe ■ No ☐ Ye 35. Any to | ns against third partie mples: Accidents, emplo s. Describe each claim or contingent and unliq s. Describe each claim. | s, whether or not by ment disputes, in uidated claims of | surance claims, or right | s to sue | mand for payment as of the debtor and rights t | o set off claims |
| ☐ Ye 33. Clair Exal No ☐ Ye 34. Othe ☐ No ☐ Ye 35. Any t ☐ No ☐ Ye 36. Add | ns against third parties mples: Accidents, emplos. Describe each claim. To contingent and unliques. Describe each claim. In contingent and unliques. Describe each claim. In accident assets you dies. Give specific information of the dollar value of all | s, whether or not by ment disputes, in uidated claims of | surance claims, or right every nature, includin om Part 4, including a | s to sue g counterclaim ny entries for p | s of the debtor and rights t | |
| ☐ Ye 33. Clair Exal No ☐ Ye 34. Othe ☐ No ☐ Ye 35. Any ☐ No ☐ Ye 36. Add for | ns against third partiemples: Accidents, emploss. Describe each claims or contingent and unliques. Describe each claims financial assets you dies. Give specific informatical the dollar value of all Part 4. Write that num | s, whether or not by ment disputes, in unique disputes, in unique disputes of the control of the | surance claims, or right every nature, includin om Part 4, including a | s to sue | as of the debtor and rights t | o set off claims |
| 33. Clair Exal No | ns against third parties mples: Accidents, emplos. Describe each claim. To contingent and unliques. Describe each claim. In contingent and unliques. Describe each claim. In accident assets you dies. Give specific information of the dollar value of all | s, whether or not by ment disputes, in upper disputes, in upper disputes, in upper disputes of upper dispute disputes dispute | every nature, including a | ny entries for p | as of the debtor and rights t | |

Official Form 106A/B Schedule A/B: Property page 4

 \square Yes. Go to line 38.

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 14 of 48 Debtor 1 Mildred C. Zimmerman Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$1,625.00 Part 3: Total personal and household items, line 15 57. \$2,500.00 58. Part 4: Total financial assets, line 36 \$300.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$4,425.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

Total of all property on Schedule A/B. Add line 55 + line 62

\$4,425.00

\$4,425.00

| | Cas | se 15-83097 Doc 1 | Filed 12/16/1 Document | | Entered 12/16/15 10:41 Page 15 of 48 | :35 | Desc Main |
|--------------------------|--|--|---|-----------------------------|--|-------------------------------|---|
| | I in this inform | nation to identify your case: | Boomen | | 400 10 01 40 | | |
| De | ebtor 1 | Mildred C. Zimmerman | | | | | |
| _ | | First Name N | fiddle Name | L | ast Name | | |
| | ebtor 2 oouse if, filing) | First Name N | fiddle Name | L | ast Name | | |
| Ur | nited States Bar | kruptcy Court for the: NORT | HERN DISTRICT OF | ILLIN | OIS | | |
| | ase number known) | | | | | | ☐ Check if this is an amended filing |
| | fficial For | m 106C C: The Proper | rty You Cla | ıim | as Exempt | | 12/15 |
| the nee | property you lis | sted on Schedule A/B: Property I attach to this page as many co | (Official Form 106A/B | as yo | other, both are equally responsible for our source, list the property that you age as necessary. On the top of any | claim a | s exempt. If more space is |
| spe any fun exe | ecific dollar am / applicable sta ids—may be un emption to a pa | nount as exempt. Alternatively atutory limit. Some exemption nlimited in dollar amount. Ho | y, you may claim the to ns—such as those for wever, if you claim ar | full fa r heal n exer | ount of the exemption you claim. (ir market value of the property be th aids, rights to receive certain b mption of 100% of fair market valu determined to exceed that amount | ing exe enefits, e unde | mpted up to the amount of and tax-exempt retirement ralaw that limits the |
| Pa | rt 1: Identify | y the Property You Claim as E | xempt | | | | |
| 1. | Which set of | exemptions are you claiming | ? Check one only, eve | en if yo | our spouse is filing with you. | | |
| | You are cla | aiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | | |
| | ☐ You are cla | niming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | |
| 2. | For any prop | erty you list on Schedule A/B | that you claim as exe | empt, | fill in the information below. | | |
| | | on of the property and line on hat lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific | c laws that allow exemption |
| | | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | • | er Seabring 121,000 miles | \$1,625.00 | | \$1,625.00 | 735 IL | .CS 5/12-1001(c) |
| | Line from Sch | edule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Misc. housel | hold goods and furnishings, | \$1,900.00 | | \$1,900.00 | 735 IL | .CS 5/12-1001(b) |
| | | edule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | | l personal items | \$600.00 | | \$600.00 | 735 IL | .CS 5/12-1001(a) |
| | Line Holli Gell | | | | 100% of fair market value, up to any applicable statutory limit | | |
| | | of Illinois Retirement | Unknown | | | 735 IL | .CS 5/12-1006 |
| | Line from Sch | edule A/B: 21.1 | | | 100% of fair market value, up to | | |

3. Are you claiming a homestead exemption of more than \$155,675?

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

Official Form 106C

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 16 of 48

Debtor 1 Mildred C. Zimmerman

Case number (if known)

| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------------|-------------|--|-----------------------|--|
| Debtor 1 | or 1 Mildred C. Zimmerman | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | ☐ Check if this is an | |
| | | | | | amended filing | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | | Document | Page 18 of 48 | |
|--|---|--|--|---|
| Fill in this info | ormation to identify your o | | | |
| Debtor 1 | Mildred C. Zimmerr | nan | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLII | NOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official Ear | rm 106E/F | | | |
| | | ho Have Unsecured (| Plaime | 12/15 |
| | | | claims and Part 2 for creditors with NONPRIOR | |
| ne Continuation umber (if knowr | Page to this page. If you have | no information to report in a Part, d | / the Part you need, fill it out, number the entric lo not file that Part. On the top of any additiona | |
| | itors have priority unsecured | | | |
| ■ No. Go to | | o , | | |
| ☐ Yes. | , r art 2. | | | |
| | All of Your NONPRIORIT | / Unsecured Claims | | |
| | itors have nonpriority unsecu | | | |
| _ ' | | rt. Submit this form to the court with you | ur other schedules | |
| _ | lave nothing to report in this par | t. Oubline and form to the court with you | a other soriedules. | |
| Yes. | | | | |
| | | | | |
| claim, list the | creditor separately for each cla | im. For each claim listed, identify what | reditor who holds each claim. If a creditor has retype of claim it is. Do not list claims already includent three nonpriority unsecured claims fill out the 0 | ded in Part 1. If more than one |
| claim, list the | creditor separately for each class a particular claim, list the othe | im. For each claim listed, identify what | type of claim it is. Do not list claims already incluing three nonpriority unsecured claims fill out the 0 | ded in Part 1. If more than one Continuation Page of Part 2. |
| claim, list the creditor holds 4.1 Capita Nonprio | e creditor separately for each class a particular claim, list the other al One rity Creditor's Name | nim. For each claim listed, identify what r creditors in Part 3.lf you have more the Last 4 digits of accou | type of claim it is. Do not list claims already incluing three nonpriority unsecured claims fill out the country unsecured claims. | ded in Part 1. If more than one Continuation Page of Part 2. Total claim |
| claim, list the creditor holds 4.1 Capita Nonprio P.O. E | e creditor separately for each class a particular claim, list the other al One rity Creditor's Name 80x 30285 | im. For each claim listed, identify what r creditors in Part 3.lf you have more the Last 4 digits of accou | type of claim it is. Do not list claims already incluing three nonpriority unsecured claims fill out the country unsecured claims. | ded in Part 1. If more than one Continuation Page of Part 2. Total claim |
| claim, list the creditor holds 4.1 Capita Nonprio P.O. E Salt Li | e creditor separately for each class a particular claim, list the other al One rity Creditor's Name | im. For each claim listed, identify what r creditors in Part 3.lf you have more the Last 4 digits of accou | type of claim it is. Do not list claims already incluing three nonpriority unsecured claims fill out the country unsecured claims. | ded in Part 1. If more than one Continuation Page of Part 2. Total claim |
| claim, list the creditor holds 4.1 Capita Nonprio P.O. E Salt La Number | a creditor separately for each class a particular claim, list the other al One rity Creditor's Name Box 30285 ake City, UT 84130-0285 | Last 4 digits of accou When was the debt in As of the date you file | type of claim it is. Do not list claims already include an three nonpriority unsecured claims fill out the country unsecured claims fill out the country unsecured? | ded in Part 1. If more than one Continuation Page of Part 2. Total claim |
| 4.1 Capita Nonprio P.O. E Salt La Number Who inc | al One rity Creditor's Name Box 30285 ake City, UT 84130-0285 Street City State Zlp Code | Last 4 digits of accou When was the debt in As of the date you file Contingent | type of claim it is. Do not list claims already include an three nonpriority unsecured claims fill out the country unsecured claims fill out the country unsecured? | ded in Part 1. If more than one Continuation Page of Part 2. Total claim |
| claim, list the creditor holds 4.1 Capita Nonprio P.O. E Salt Li Number Who inc | al One rity Creditor's Name Box 30285 ake City, UT 84130-0285 Street City State Zlp Code curred the debt? Check one. | Last 4 digits of accou When was the debt in As of the date you file Unliquidated | type of claim it is. Do not list claims already include an three nonpriority unsecured claims fill out the country unsecured claims fill out the country unsecured? | ded in Part 1. If more than one Continuation Page of Part 2. Total claim |
| claim, list the creditor holds 4.1 Capita Nonprio P.O. E Salt La Number Who inc | al One rity Creditor's Name Box 30285 ake City, UT 84130-0285 Street City State Zlp Code curred the debt? Check one. | Last 4 digits of accou When was the debt in As of the date you file Contingent | type of claim it is. Do not list claims already include an three nonpriority unsecured claims fill out the count number | ded in Part 1. If more than one Continuation Page of Part 2. Total claim |
| claim, list the creditor holds 4.1 Capita Nonprio P.O. E Salt La Number Who inc | al One rity Creditor's Name Box 30285 ake City, UT 84130-0286 Street City State Zip Code curred the debt? Check one. tor 1 only tor 2 only | Last 4 digits of accou When was the debt in As of the date you file Unliquidated Disputed Type of NONPRIORIT | type of claim it is. Do not list claims already include an three nonpriority unsecured claims fill out the count number | ded in Part 1. If more than one Continuation Page of Part 2. Total claim |
| claim, list the creditor holds 4.1 Capita Nonprio P.O. E Salt Li Number Who in Debi Debi At le | al One al One rity Creditor's Name Box 30285 ake City, UT 84130-0286 Street City State Zlp Code curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only | Last 4 digits of accou When was the debt in As of the date you file Contingent Unliquidated Disputed Type of NONPRIORIT | type of claim it is. Do not list claims already include an three nonpriority unsecured claims fill out the curred? The claim is: Check all that apply The unsecured claim: Out of a separation agreement or divorce that your search of the course of the c | ded in Part 1. If more than one Continuation Page of Part 2. Total claim \$944.00 |
| claim, list the creditor holds 4.1 Capita Nonprio P.O. E Salt Li Number Who in Debi Debi At le | al One rity Creditor's Name Box 30285 ake City, UT 84130-0285 Street City State Zlp Code curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only ast one of the debtors and anot ck if this claim is for a comm | Last 4 digits of accou When was the debt in As of the date you file Contingent Unliquidated Disputed Type of NONPRIORIT her Unliquidons arising report as priority claims | type of claim it is. Do not list claims already include an three nonpriority unsecured claims fill out the curred? The claim is: Check all that apply The unsecured claim: Out of a separation agreement or divorce that your search of the course of the c | ded in Part 1. If more than one Continuation Page of Part 2. Total claim \$944.00 |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 19 of 48

| Debte | or 1 Mildred C. Zimmerman | Case number (if know) | |
|-------|---|---|------------|
| 4.2 | Chase Credit Cards Nonpriority Creditor's Name | Last 4 digits of account number | \$2,727.00 |
| | P. O. Box 15298 | When was the debt incurred? | |
| | Wilmington, DE 19850-5298 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | ☐ Disputed | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify misc. charges | |
| 4.3 | First Premier Bank | Last 4 digits of account number | \$500.00 |
| | Nonpriority Creditor's Name | | φοσοισσ |
| | P.O. Box 5524 | When was the debt incurred? | |
| | Sioux Falls, SD 57117-5524 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | | Disputed | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify misc. charges | |
| 4.4 | HSBC Card Retail Nonpriority Creditor's Name | Last 4 digits of account number | \$2,776.00 |
| | P.O. Box 4169 | When was the debt incurred? | |
| | Carol Stream, IL 60197 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | ■ Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | ☐ Disputed | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other, Specify misc. charges | |
| | _ 100 | Utner, Specify 11130, Orlanges | |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 20 of 48

| Debt | or 1 Mildred C. Zimmerman | Case number (if know) | |
|------|--|---|------------|
| 4.5 | Main Street Acquisition Corp. Nonpriority Creditor's Name | Last 4 digits of account number | \$2,618.97 |
| | c/o The Shindler Law Firm 1990 E. Algonquin Rd, Suite 180 Schaumburg, IL 60173 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. ☐ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify 2011 SC 4269 | |
| 4.6 | Midland Credit Management Nonpriority Creditor's Name | Last 4 digits of account number | \$2,726.93 |
| | 8875 Aero Drive, Suite 200 San Diego, CA 92123 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | ☐ Disputed | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify LLC, and other misc. accounts | |
| 4.7 | Portfolio Recovery Associates | Last 4 digits of account number | \$1,131.00 |
| | Nonpriority Creditor's Name 120 Corporate Boulevard Norfolk, VA 23502 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | ■ Debtor 1 only | ☐ Unliquidated | |
| | Debtor 2 only | ☐ Disputed | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | collections for Capital One, Discover, and other Specify other misc. accounts | |

| Debtor 1 | Mildred C. | . Zimmerman | Document | Page 2: — | L OT 4 Case n | .8 umbe | er (if know) | |
|----------------------|--|--|--|--|------------------|------------|---|---------------------------|
| | | estements LLC | Last 4 digits of ac | count number | | | | \$2,776.56 |
| | Nonpriority Cred | | | | | | | |
| (| c/o Blitt and | Gaines PC | When was the deb | t incurred? | | | | _ |
| 6 | 661 Glenn A | venue | | | | | | |
| | | _ 60090-6017 | | | | | | |
| 1 | Number Street (| City State Zlp Code | As of the date you | file, the claim is | s: Check | all tha | t apply | |
| \ | Who incurred t | he debt? Check one. | ☐ Contingent | | | | | |
| I | Debtor 1 onl | у | Unliquidated | | | | | |
| [| Debtor 2 onl | у | _ ' | | | | | |
| Г | Debtor 1 and | Nebtor 2 only | ☐ Disputed | | | | | |
| | | • | Type of NONPRIO | RITY unsecured | l claim: | | | |
| _ | | of the debtors and another | ☐ Student loans | | | | | |
| | | s claim is for a community debt bject to offset? | Obligations aris | | ration agr | reeme | nt or divorce that you did not | |
| ı | No | | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| [| □Yes | | Other. Specify | 2015 SC 10 | 46 | | | |
| trying to more th | page only if y collect from y an one credito | s to Be Notified About a Debt ou have others to be notified about you for a debt you owe to someor or for any of the debts that you list r 2, do not fill out or submit this p | ut your bankruptcy, fo ne else, list the origina ted in Parts 1 or 2, list | or a debt that you al creditor in Par | ts 1 or 2 | , then | list the collection agency her | e. Similarly, if you have |
| Name and | d Address | | n which entry in Part 1 o | or Part 2 did you | list the or | iginal | creditor? | |
| -NONE- | - | Li | ne of (Check one): | | | | with Priority Unsecured Claims with Nonpriority Unsecured Cla | |
| | | La | ast 4 digits of account n | | art Z. Ore | uilois | with Nonphonity Onsecured Cia | IIIIS |
| Part 4: | Add the Ar | mounts for Each Type of Uns | ecured Claim | | | | | |
| | | • | | | | | | |
| | e amounts of c cured claim. | certain types of unsecured claims | . This information is f | or statisticai rep | orting p | urpos | es only. 28 U.S.C. §159. Add | ne amounts for each typ |
| | | | | | | | Total claim | |
| | 6a. | Domestic support obligations | | | 6a. | \$ | 0.00 | _ |
| Total clai | | Taxes and certain other debts y | ou owe the governme | nt | 6b. | \$ | 0.00 | |
| | 6c. | Claims for death or personal inj | J | | 6c. | Ψ .\$ | 0.00 | _ |
| | 6d. | Other. Add all other priority unsec | • | | 6d. | Ψ. \$ | 0.00 | _ |
| | Ju. | / tad all other priority dribed | a.ca siairio. Trinto tilat | aa | ou. | Ψ | 0.00 | |

| | | | | Т | otal claim |
|--------------------------|------------|--|------------|-------|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | Ch | Tayon and partain ather debte you are the reversement | Ch | • | 0.00 |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ _ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$_ | 0.00 |
| | | | | | |
| | | | | Total | Claim |
| | 6f. | Student loans | 6f. | Total | Claim 0.00 |
| Total claims | • | | 6f. | | |
| Total claims from Part 2 | 6f. 6g. | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | | |
| | • | Obligations arising out of a separation agreement or divorce that you | - | \$ | 0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. 6h. | \$ | 0.00 |

| | | Ducume | IIL FAUE ZZ UL 4 0 | |
|---------------------|--------------------------|-------------------|-------------------------------|--|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Mildred C. Zimmer | rman | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| I | Person or | company with | whom you have the , Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | | | | | |

| | | Docume | ent Page 23 d | of 48 |
|--|---|---|--|--|
| Fill in this | information to identify you | r case: | | |
| Debtor 1 | Mildred C. Zimme | ormon | | |
| Debior 1 | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filin | ng) First Name | Middle Name | Last Name | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case numb | oor | | | |
| (if known) | Jei | | | ☐ Check if this is an |
| | | | | amended filing |
| Sched Codebtors Decople are ill it out, are | filing together, both are equal number the entries in the | are also liable for any deb ually responsible for sup e boxes on the left. Attacl | olying correct informanthe | as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write |
| | and case number (if known | | | |
| 1. Do y | you have any codebtors? (If | r you are filing a joint case, | do not list either spous | e as a codebtor. |
| ■ No □ Yes | | | | |
| Arizona No. Yes 3. In Column line | a, California, Idaho, Louisiana Go to line 3 Did your spouse, former spo umn 1, list all of your codek 2 again as a codebtor only | a, Nevada, New Mexico, Pu buse, or legal equivalent live otors. Do not include your if that person is a guarar | e with you at the time? spouse as a codebto | ory? (Community property states and territories include nington, and Wisconsin.) or if your spouse is filing with you. List the person show a sure you have listed the creditor on Schedule D (Offic 06G). Use Schedule D, Schedule E/F, or Schedule G to |
| | Column 2. | , ,, | (5 | |
| - | Column 1: Your codebtor Name, Number, Street, City, State and 2 | ZIP Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 0.4 | | | | Contradity D. Par |
| 3.1 | Name | | | U Schedule D, line |
| • | | | | ☐ Schedule E/F, line ☐ Schedule G, line |
| | | | | Scriedule 9, line |
| | Number Street City | State | ZIP Code | |
| 3.2 | | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| _ | | | | |
| | Number Street | State | ZIP Code | |
| (| City | State | ZIP Code | |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 24 of 48

| Fill | in this information to identify your c | ase: | | | | | |
|--------------------|--|--|---|----------------------|--|----------------------------|--------------------------------|
| Del | otor 1 Mildred C. Zi | mmerman | | | | | |
| | otor 2 | | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | |
| (If kr | se number | | | | | ed filing | stpetition chapter ng date: |
| 0 | fficial Form 106l | | | | MM / DD/ | YYYY | |
| S | chedule I: Your Inc | ome | | | | | 12/15 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not fili r spouse is not filing w | ng jointly, and your spou ith you, do not include in | se is liv formati | ring with you, inc on about your sp | lude information | on about your pace is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | Debtor | 2 or non-filing s | spouse |
| | If you have more than one job, | Formular and adoles | ■ Employed | | ☐ Emp | oyed | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | ☐ Not € | employed | |
| | employers. | Occupation | Paraprofessional | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Rockford Board of Ed | ucation | ı <u> </u> | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 501 - 7th Street Rockford, IL 61104 | | | | |
| | | How long employed t | here? 3 years | | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. f | you have nothing to report | for any | line, write \$0 in th | e space. Include | your non-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information for | all empl | oyers for that pers | son on the lines b | pelow. If you need |
| | | | | | For Debtor 1 | For Debtor 2 non-filing sp | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. \$ | 1,460.00 | \$ | N/A |
| 3. | Estimate and list monthly overt | ime pay. | | 3. +\$ | 0.00 | +\$ | N/A |

1,460.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 25 of 48

| Debt | tor 1 | Mildred C. Zimmerman | | | Case | number (if known) | | | | |
|------|---------------------------------|--|-------------------------|-----------|------------|-------------------|----------|---------------------|-------------|----------|
| | | | | | Fo | r Debtor 1 | | Debtor -filina s | 2 or spouse | |
| | Cop | y line 4 here | 4. | | \$_ | 1,460.00 | \$ | 9 | N/A | - |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 58 | | \$_ | 295.00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5k | | \$_ | 0.00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 50 | | \$_ | 63.00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 50 | | \$_ | 0.00 | \$ | | N/A | _ |
| | 5e. | Insurance | 56 | | \$_ | 32.00 | \$ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f | | \$_ | 0.00 | \$ | | N/A | _ |
| | 5g. | Union dues | 50 | | \$_ | 25.00 | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: | 5r | 1.+ | \$_ | 0.00 | + \$ | | N/A | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 415.00 | \$ | | N/A | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 1,045.00 | \$ | | N/A | - |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 88 | a. | \$ | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8k | | \$- | 0.00 | \$ | | N/A | _ |
| | 8c. 8d. | Family support payments that you, a non-filing spouse, or a depende regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation | e nt 80 80 | | \$_ \$_ | 0.00 | \$ | | N/A N/A | _ |
| | 8e. | Social Security | 86 | €. | \$ | 0.00 | \$ | | N/A | _ |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | nce 8f | | \$_ \$ | 0.00 | \$ \$ | | N/A N/A | _ |
| | 8h. | Other monthly income. Specify: Shaklee Vitamin Sales | |). 1.+ | \$ | | + \$ | | N/A | _ |
| 9. | | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | Г | *- \$ | 150.00 | \$ | | N// | - |
| Э. | Auc | all other income. Add lines datobrourourderolrogram. | 9. | Ľ | Ψ <u> </u> | 130.00 | Ψ | | 111/7 | <u> </u> |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,195.00 + \$ | | N/A | = \$ | 1,195.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ť- | | 1,133.00 | | 14// (| - | 1,133.00 |
| 11. | State Included the other Double | te all other regular contributions to the expenses that you list in Schedulade contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are nearly: | our dep | | | • | | | e J. +\$ | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The re that amount on the Summary of Schedules and Statistical Summary of Certies | | | | | | 12. | \$ | 1,195.00 |
| 13. | Do : | you expect an increase or decrease within the year after you file this for No. | m? | | | | | | | y income |
| | = | Voc. Evaloin: | | | | | | | | 1 |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 26 of 48

| Fill in | this information to identify y | our case: | | | | | | | |
|--------------|--|--|--|--|------------------------|--------------------|------------------------------------|--|----|
| Debtor | | | | | CI | ook if | thic io | | |
| Debioi | Mildred C. Z | ımmermar | 1 | | | neck if i An a | tnis is: amended filing | | |
| Debtor | 2 | | | | | A su | upplement shov | ving postpetition chapter | |
| (Spous | se, if filing) | | | | | 13 € | expenses as of | the following date: | |
| United | States Bankruptcy Court for the | : NORTH | IERN DISTRICT OF ILLIN | OIS | | MM | / DD / YYYY | | |
| Case n | number wn) | | | | | | | | |
| Offi | cial Form 106J | | | | | | | | |
| Sch | nedule J: Your | Exper | ses | | | | | 12/ | 15 |
| Be as inform | complete and accurate a nation. If more space is n er (if known). Answer eve | s possible eeded, atta ery questio | . If two married people and the contract is the contract that and the contract is the contract in the contract in the contract in the contract is the contract in the contract | e filing together, b form. On the top o | oth are e f any add | qually litional | responsible for the pages, write y | or supplying correct your name and case | |
| | s this a joint case? | enoia | | | | | | | _ |
| | ■ No. Go to line 2. □ Yes. Does Debtor 2 live | in a separ | ate household? | | | | | | |
| | □ No | - | ial Form 106J-2, <i>Expenses</i> | s for Separate House | ehold of E | ebtor 2 | 2. | | |
| 2. | Oo you have dependents? | ■ No | | | | | | | |
| | Do not list Debtor 1 and Debtor 2. | ☐ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | | Dependent's age | Does dependent live with you? | |
| | Oo not state the | | | | | | | □ No | |
| d | lependents names. | | | | | | | ☐ Yes | |
| | | | | | | | | □ No | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | □ No □ Yes | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | ☐ Yes | |
| е | Do your expenses include expenses of people other rourself and your depende | than 🗖 | No Yes | | | | | _ 166 | |
| exper | Estimate Your Ongo ate your expenses as of y uses as of a date after the cable date. | our bankr | uptcy filing date unless y | | | | | | |
| the va | de expenses paid for with alue of such assistance an ial Form 106l.) | | | | | | Your expe | enses | |
| | | | | | | | | | |
| | The rental or home owner payments and any rent for the second se | | | nclude first mortgag | e 4. | \$_ | | 600.00 | |
| K | f not included in line 4: | | | | | | | | |
| 4 | a. Real estate taxes | | | | 4a. | \$ | | 0.00 | |
| | b. Property, homeowner | 's, or renter | 's insurance | | 4b. | : — | | 0.00 | |
| 4 | c. Home maintenance, r | epair, and ι | upkeep expenses | | 4c. | \$ | | 0.00 | |
| | d. Homeowner's associa | | | | 4d. | \$ _ | | 0.00 | |
| ^ | Additional mortagae navm | ODIC TOT W | THE FORIGODOO ALLON OF NO | ma aguity lagge | K | • | | 0.00 | |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 27 of 48

| Debto | r 1 Mildred | I C. Zimmerman | Case num | ber (if known) | |
|-------------|-----------------|--|--------------|--------------------|--------------------------|
| S. U | Jtilities: | | | | |
| _ | | ty, heat, natural gas | 6a. | \$ | 100.00 |
| | | sewer, garbage collection | 6b. | · | 0.00 |
| _ | | | 6c. | | |
| _ | • | ne, cell phone, Internet, satellite, and cable services | | | 165.00 |
| | id. Other. S | | 6d. | | 0.00 |
| | | usekeeping supplies | 7. | | 100.00 |
| _ | | d children's education costs | 8. | \$ | 0.00 |
| . С | Clothing, laur | ndry, and dry cleaning | 9. | \$ | 0.00 |
| 0. P | Personal care | products and services | 10. | \$ | 0.00 |
| | | dental expenses | 11. | \$ | 0.00 |
| | | n. Include gas, maintenance, bus or train fare. | | · - | |
| | | car payments. | 12. | \$ | 130.00 |
| 3. E | Entertainmen | t, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| | | ntributions and religious donations | 14. | | 0.00 |
| | nsurance. | | | — | 0.00 |
| | | insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 5a. Life insu | | 15a. | \$ | 0.00 |
| | 5b. Health in | | 15a. 15b. | | 0.00 |
| | | | | * | |
| | 5c. Vehicle | | 15c. | · | 111.00 |
| | | surance. Specify: | 15d. | \$ | 0.00 |
| | | include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | Specify: | | 16. | \$ | 0.00 |
| | | r lease payments: | | | |
| | | ments for Vehicle 1 | 17a. | \$ | 0.00 |
| 1 | 7b. Car pay | ments for Vehicle 2 | 17b. | \$ | 0.00 |
| | 7c. Other. S | | 17c. | \$ | 0.00 |
| | 7d. Other. S | | 17d. | · | 0.00 |
| | | ts of alimony, maintenance, and support that you did not report as | | Ψ | 0.00 |
| 5. Y | our paymen | ts of allmony, maintenance, and support that you did not report as n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | \$ | 0.00 |
| | | nts you make to support others who do not live with you. | 10. | ¢ | 0.00 |
| | | its you make to support others who do not live with you. | 40 | Φ | 0.00 |
| | Specify: | wants assume and included in lines 4 on 5 of this forms on an Oct | 19. | | |
| | | operty expenses not included in lines 4 or 5 of this form or on Sch | | | 0.00 |
| | | ges on other property | 20a. | · | 0.00 |
| | 20b. Real est | | 20b. | · | 0.00 |
| 2 | 20c. Property | /, homeowner's, or renter's insurance | 20c. | \$ | 39.00 |
| 2 | 20d. Mainten | ance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | | vner's association or condominium dues | 20e. | \$ | 0.00 |
| | Other: Specify | r | | +\$ | 0.00 |
| . • | zaner opcomy | ·· | | .Ψ | 0.00 |
| 2. C | Calculate you | r monthly expenses | | | |
| | | 4 through 21. | | \$ | 1,245.00 |
| | | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | .,= |
| | | | | | 4.045.00 |
| 2 | zzc. Add line z | 22a and 22b. The result is your monthly expenses. | |) ³ | 1,245.00 |
| ۸ ۲ | Calculate vou | r monthly net income. | | | |
| | - | ie 12 (your combined monthly income) from Schedule I. | 23a. | ¢ | 4 405 00 |
| | | | | · | 1,195.00 |
| 2 | зв. Сору ус | our monthly expenses from line 22c above. | 23b. | -ֆ | 1,245.00 |
| _ | | | | | |
| 2 | | t your monthly expenses from your monthly income. | 226 | • | -50.00 |
| | The res | ult is your <i>monthly net income</i> . | 23c. | \$ | -50.00 |
| | | | | | |
| | | et an increase or decrease in your expenses within the year after your | | | |
| | | you expect to finish paying for your car loan within the year or do you expect your | mortgage pa | ayment to increase | or decrease because of a |
| _ | _ | ne terms of your mortgage? | | | |
| | No. | | | | |
| Г | ☐ Yes. | Explain here: | | | |
| | → 1 €5. | Explain fiere. | | | |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 28 of 48

| Fill in this infor | mation to identify your | case: | | |
|---------------------|----------------------------|---------------------------|----------------------------------|---|
| Debtor 1 | Mildred C. Zimmer | man | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | T: AN | M: 1 II N | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| 000000 | 400D | | | |
| Official For | | | | |
| Declarat | tion About a | ın Individual | Debtor's Sched | lules 12/19 |
| | | | | |
| If two married p | eople are filing togethe | r, both are equally respo | nsible for supplying correct in | formation. |
| You must file thi | is form whenever you fi | ile bankruptcy schedules | or amended schedules. Makir | ng a false statement, concealing property, or |
| | | | ruptcy case can result in fines | up to \$250,000, or imprisonment for up to 20 |
| years, or both. 1 | 8 U.S.C. §§ 152, 1341, 1 | 1519, and 3571. | | |
| | | | | |
| Sig | n Below | | | |
| | | | | |
| Did you pa | y or agree to pay some | one who is NOT an attor | ney to help you fill out bankrup | otcy forms? |
| | | | | |
| ■ No | | | | |
| ☐ Yes. I | Name of person | | . Attach <i>Ba</i> | nkruptcy Petition Preparer's Notice, Declaration, |
| | · | | and Signat | ure (Official Form 119). |
| | | | | |
| Under pena | alty of perjury, I declare | that I have read the sum | mary and schedules filed with | this declaration and |
| that they ar | e true and correct. | | | |
| X /s/ Milo | dred C. Zimmerman | | Χ | |
| | d C. Zimmerman | | Signature of Debtor | 2 |
| Signatu | re of Debtor 1 | | - | |
| | | | | |

Date

Date December 8, 2015

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 29 of 48

| 31 | l in this inform | ation to identify you | r casa: | | | |
|------------------|--|--|--|---|---|---|
| | ebtor 1 | Mildred C. Zimme | | | | |
| DC | DIOI 1 | First Name | Middle Name | Last Name | | |
| | ebtor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| | | kruptcy Court for the: | NORTHERN DISTRICT (| | | |
| Ui | illeu States Dari | kruptcy Court for the. | NORTHERN DISTRICT | DI ILLINOIS | | |
| | nse number | | | | _ | Check if this is an mended filing |
| | fficial For | | Affairs for Indivic | luals Filing for B | ankruptcy | 12/15 |
| info nui | ormation. If months in the mon | ore space is needed,). Answer every ques | attach a separate sheet to | this form. On the top of an | equally responsible for sup y additional pages, write yo | |
| 1. | | current marital statu | | 1 Lived Belofe | | |
| | | | | | | |
| | ■ Married■ Not marri | ied | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. List | all of the places you l | ived in the last 3 years. Do n | ot include where you live nov | v. | |
| | Debtor 1 Price | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. sta | | | | | nity property state or territor ico, Texas, Washington and V | |
| | ■ No □ Yes. Mak | ke sure you fill out <i>Scl</i> | hedule H: Your Codebtors (O | fficial Form 106H). | | |
| Pa | rt 2 Explain | the Sources of You | r Income | | | |
| 4. | Fill in the total | amount of income yo | u received from all jobs and | ng a business during this yeall businesses, including part e together, list it only once u | | ndar years? |
| | □ No ■ Yes. Fill i | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$12,065.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Page 30 of 48 Document Debtor 1 Mildred C. Zimmerman Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$14,949.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. Describe below.. (before deductions and (before deductions exclusions) and exclusions) List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment** Amount you Was this payment for ... Total amount paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

_ ..

Yes. List all payments to an insider

Insider's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 31 of 48

| De | otor 1 Mildred C. Zimmerman | | Case | number (if known) | | |
|-----|--|---|--|--|--------------------------------------|---------------------|
| | | | | | | |
| 8. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cost | | yments or transfer ar | ny property on a | ccount of a deb | ot that benefited a |
| | ■ No | | | | | |
| | Yes. List all payments to an insider | Datas of navement | Total amount | A | Danaan fan th | ! |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for the Include creditor | |
| Pa | rt 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. | cy, were you a party in a cases, small claims action | ny lawsuit, court acti ns, divorces, collection | ion, or administ n suits, paternity | rative proceedir actions, support | ng? or custody |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | case |
| | Velocity Investments LLC | Suit to collect a | Winnebago Cour | nty Circuit | Pending | |
| | vs. Mildred C. Zimmerman 2015 SC 1046 | debt | Court 400 W. State Str | oot . | On appeal | |
| | 2010 00 1040 | | Rockford, IL 6110 | | ☐ Concluded | |
| | Check all that apply and fill in the details below No Yes. Fill in the information below. Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | Creditor Name and Address | Explain what happene | d | Date | | propert |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment becan solve the solve to make a payment becan solve the | otcy, did any creditor, inc ause you owed a debt? | cluding a bank or fin | ancial institutio | n, set off any an | nounts from your |
| | Creditor Name and Address | Describe the action the | e creditor took | Date | action was | Amoun |
| | | | | taker | 1 | |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an | | erty in the possession | on of an assigne | e for the benefi | t of creditors, a |
| | ■ No | | | | | |
| | ☐ Yes | | | | | |
| Pa | rt 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. | tcy, did you give any gif | ts with a total value o | of more than \$6 | 00 per person? | |
| | Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | Describe the gifts | | Date: | s you gave | Value |

Address:

Person to Whom You Gave the Gift and

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 32 of 48 Case number (if known)

| 14. | Within 2 years before you filed for bank | kruptcy, c | lid you give any gifts or contributions | with a tota | I value of more than | \$600 to any charity |
|-----|--|--|--|-------------|--|------------------------|
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details for each gift or | contribut | ion. | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name | | Describe what you contributed | | Dates you contributed | Value |
| | Address (Number, Street, City, State and ZIP Co | de) | | | | |
| Pai | t 6: List Certain Losses | | | | | |
| 15. | Within 1 year before you filed for banks disaster, or gambling? | ruptcy or | since you filed for bankruptcy, did yo | u lose anyt | hing because of the | ft, fire, other |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Describe the property you lost and | Descri | be any insurance coverage for the los | s | Date of your | Value of property |
| | how the loss occurred | | the amount that insurance has paid. Lis | | loss | los |
| | | g insurance claims on line 33 of <i>Schedul</i> ty. | | | | |
| Pai | t 7: List Certain Payments or Transfe | rs | | | | |
| | | | | | | |
| 16. | Within 1 year before you filed for banks consulted about seeking bankruptcy of Include any attorneys, bankruptcy petition | r preparir | ng a bankruptcy petition? | | | rty to anyone you |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | | Description and value of any proper | 4 | Data naumant | Amaunt a |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not | : You | Description and value of any proper transferred | ty | Date payment or transfer was made | Amount o paymen |
| | Balsley & Dahlberg | | Attorney Fees | | December 2, | \$500.00 |
| | 5130 North Second Street Loves Park, IL 61111 www.balsleylawoffice.com | | | | 2015 | ,,,,, |
| 17. | Within 1 year before you filed for banks promised to help you deal with your cr. Do not include any payment or transfer the | editors o | r to make payments to your creditors? | | r transfer any prope | rty to anyone who |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid | | Description and value of any proper | tv | Date payment | Amount o |
| | Address | | transferred | .9 | or transfer was made | paymen |
| 18. | Within 2 years before you filed for bank transferred in the ordinary course of you Include both outright transfers and transfer include gifts and transfers that you have a | our busin ers made a | ess or financial affairs? as security (such as the granting of a sec | | | |
| | No Transport | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred | | iny property or received or debts change | Date transfer was made |

Person's relationship to you

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 33 of 48

Case number (if known)

Debtor 1 Mildred C. Zimmerman

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | |
|-----|---|--|---------------------------|--------------|---|---|
| | Name of trust | Description and | value of the pro | perty trans | sferred | Date Transfer was made |
| Par | List of Certain Financial Accounts, Ir | nstruments, Safe Depos | it Boxes, and S | torage Unit | s | |
| 20. | Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assolution No Yes. Fill in the details. | or other financial accor | unts; certificate: | s of deposi | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of according trument | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | year before you filed fo | or bankruptcy, a | ny safe der | oosit box or other depos | sitory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe | the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit | or place other than you | ır home within 1 | l year befor | re you filed for bankrupt | су |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe | the contents | Do you still have it? |
| Par | 9: Identify Property You Hold or Contro | I for Someone Else | | | | |
| 23. | Do you hold or control any property that so for someone. | omeone else owns? Inc | lude any proper | rty you borı | rowed from, are storing | for, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe | the property | Value |
| Par | t 10: Give Details About Environmental In | formation | | | | |
| For | the purpose of Part 10, the following definit | tions apply: | | | | |

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Page 34 of 48 Case number (if known) Document

Debtor 1 Mildred C. Zimmerman

| 24. | Has any governmental unit notified you that yo | ou may be liable or potentially liable | under or in violation of an environm | nental law? |
|-----|--|--|---|--------------------|
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 25. | Have you notified any governmental unit of an | y release of hazardous material? | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
| 26. | Have you been a party in any judicial or admin | istrative proceeding under any envir | ronmental law? Include settlements | and orders. |
| | Yes. Fill in the details. | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
| Par | 11: Give Details About Your Business or Co | nnections to Any Business | | |
| 27. | Within 4 years before you filed for bankruptcy, | , did you own a business or have an | y of the following connections to an | y business? |
| | A sole proprietor or self-employed in a | trade, profession, or other activity, | either full-time or part-time | |
| | ☐ A member of a limited liability compan | y (LLC) or limited liability partnershi | p (LLP) | |
| | ☐ A partner in a partnership | | | |
| | ☐ An officer, director, or managing exect | utive of a corporation | | |
| | ☐ An owner of at least 5% of the voting of | or equity securities of a corporation | | |
| | ☐ No. None of the above applies. Go to Par | t 12. | | |
| | ■ Yes. Check all that apply above and fill in | the details below for each business | • | |
| | Business Name D Address | escribe the nature of the business | Employer Identification number Do not include Social Security | |
| | | ame of accountant or bookkeeper | Dates business existed | number of fine. |
| | Shaklee b/d/a Millie Zimmerman V 140 Glen Road, Apt. # 1 | itamin Sales | EIN: | |
| | Rockford, IL 61103 | | From-To 1990 to Present | |
| 28. | Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties. | , did you give a financial statement to | o anyone about your business? Incl | ude all financial |
| | ■ No | | | |
| | Yes. Fill in the details below. | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | ate Issued | | |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 35 of 48

Debtor 1 Mildred C. Zimmerman Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Mildred C. Zimmerman Mildred C. Zimmerman Signature of Debtor 2 Signature of Debtor 1 Date December 8, 2015 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 36 of 48

| Fill in this infor | rmation to identify your cas | se: | | |
|---|--|--|---|--|
| Debtor 1 | Mildred C. Zimmerma | ın | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | First Name | Middle Norse | Last Mana | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: N | ORTHERN DIS | TRICT OF ILLINOIS | |
| Case number | | | | _ 0 |
| (if known) | | | | Check if this is an |
| | | | | amended filing |
| | | | | |
| Official Fo | orm 108 | | | |
| Stateme | nt of Intention | for Indiv | iduals Filing Under Chapte | er 7 |
| | | | <u> </u> | |
| on the f two married p sign a Be as complete write y Part 1: List Y For any credit information b | e form reople are filing together in nd date the form. and accurate as possible. your name and case number our Creditors Who Have S tors that you listed in Part | a joint case, bo If more space is er (if known). ecured Claims 1 of Schedule D | the time for cause. You must also send copies to the other are equally responsible for supplying correct in a needed, attach a separate sheet to this form. On the other controls are controls. Creditors Who Have Claims Secured by Property What do you intend to do with the property that | nformation. Both debtors must the top of any additional pages, |
| identity the Ci | reditor and the property that | is collater at | secures a debt? | as exempt on Schedule C? |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | |
| | _ | | ☐ Retain the property and enter into a | ☐ Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | 1. | | ☐ Retain the property and [explain]: | |
| securing debt | II. | | | _ |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | 2110 |
| | | | ☐ Retain the property and enter into a | ☐ Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | : | | | _ |
| Creditor's | | | П 0 | |
| | | | Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | □Yes |
| Description of | f | | ☐ Retain the property and enter into a Reaffirmation Agreement. | – 103 |
| property | | | | |
| | | | ☐ Retain the property and [explain]: | |

Official Form 108

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ No

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 37 of 48

| B8 (Form 8) (12/08) | | Page 2 |
|--|--|---|
| name: | ☐ Retain the property and redeem it. | ☐ Yes |
| Description of | Retain the property and enter into a | |
| property | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | The retain the property and [explain]. | |
| | | |
| Part 2: List Your Unexpired Personal Property Lease | | |
| For any unexpired personal property lease that you liste in the information below. Do not list real estate leases. I You may assume an unexpired personal property lease | Unexpired leases are leases that are still in effe | ct; the lease period has not yet ended. |
| Describe your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's name: | | □ No |
| Description of leased Property: | | - |
| Troperty. | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| | | |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased | | |
| Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| | | |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased | | |
| Property: | | ☐ Yes |
| Part 3: Sign Below | | |
| Under penalty of perjury, I declare that I have indicated property that is subject to an unexpired lease. | my intention about any property of my estate th | at secures a debt and any personal |
| X /s/ Mildred C. Zimmerman | X | |
| Mildred C. Zimmerman | Signature of Debtor 2 | |
| Signature of Debtor 1 | | |
| Date December 8, 2015 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 42 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Mildred C. Zimmerman | | Case No. | | |
|-------|---|---|--|---|------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPEN | NSATION OF ATTO | RNEY FOR D | EBTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy | y, or agreed to be pai | d to me, for services rendered or | : to |
| | For legal services, I have agreed to accept | | \$ | 500.00 | |
| | Prior to the filing of this statement I have received | | | 500.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. | \$_335.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compe | ensation with any other person | n unless they are mer | nbers and associates of my law t | īrm. |
| | ☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name | | | | A |
| 6. | In return for the above-disclosed fee, I have agreed to re- | nder legal service for all aspec | cts of the bankruptcy | case, including: | |
| | a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] Negotiations with secured creditors to redu agreements and applications as needed; profilens on household goods. | ement of affairs and plan which its and confirmation hearing, a ce to market value; exemp | th may be required; and any adjourned he tion planning; prep | arings thereof; aration and filing of reaffirma | |
| 7. | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any discha- other adversary proceeding. | does not include the following argeability actions, judicial | ng service: lien avoidances, re | lief from stay actions or any | |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of any pankruptcy proceeding. | agreement or arrangement fo | r payment to me for | representation of the debtor(s) in | 1 |
| Г | December 8, 2015 | /s/ Jeffry A Dahlb | era | | |
| | Date | Jeffry A Dahlberg |] | | |
| | | Signature of Attorn Balsley & Dahlbe | | | |
| | | 5130 North Seco | nd Street | | |
| | | Loves Park, IL 61 (815) 877-2593 | 111 Fax: (815) 877-796 | 55 | |
| | | www.balsleylawo | | JO | |
| | | Name of law firm | | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In re:

Case No.: 15-

Mildred C. Zimmerman

Judge Thomas M Lynch

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 7 DEBTORS AND THEIR ATTORNEYS

BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case as required by Local Bankruptcy Rule and explain how and when the attorney's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, statements and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, statements and schedules.
- 5. Advise the debtor of the need to maintain appropriate insurance.

AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

1. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card

does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.

- 2. Notify the attorney of any change in the debtor's address or telephone number.
- 3. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 4. Contact the attorney immediately if the debtor loses employment, has a significant change in income or experiences any other significant change in financial situation (such as serious illness, lottery winnings or an inheritance).
- 5. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 6. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the Internal Revenue Service or the Illinois Department of Revenue.
- 7. Contact the attorney before selling real property while the bankruptcy is pending.
- 8. Pay all fees for amendments in a timely fashion.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination).
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 7 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely prepare, file and serve any necessary amended statements and schedules and any change of address in accordance with information provided by the debtor.
- 7. Monitor all incoming case information.

- 8. Prepare, file and serve all appropriate motions to avoid liens.
- 9. Provide any other legal services necessary for the administration of the case before the Bankruptcy Court.
- 10. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 11. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 12. The services to be provided by the attorney specifically exclude the representation in any adversary proceeding filed by any creditor.

| Date: 12.08.15 | |
|--|--|
| Total fee to be paid for attorney's services: | |
| \$ 500.00 (Do not sign if this line is blank) | |

I understand that I may be subject to a random audit conducted by a private audit firm pursuant to §603 of the Bankruptcy Code and will have to produce certain documents which may include pay stubs for the six (6) calendar months prior to filing; two years of federal tax returns, including any schedules and forms; account statements for all depository and investment accounts for six calendar months preceding the date of filing of the petition, plus the month in which the petition was filed, along with sufficient documentation to reasonably explain the source of deposits or credits and the purpose of checks, withdrawals or debits and a copy of any divorce decree and/or property settlement entered within the last three years and any current child support/alimony obligation that I may have.

Signed:

Mildred C. Zimmerman, Deb

Dahlberg Attorney for Debtor(s).

BALSLEY & DAHLBERG 5130 North Second Street Loves Park, IL 61111-5002 815-877-2593

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 46 of 48

Attorney - Client Agreement Chapter 7

The undersigned hires Balsley & Dahlberg Law Office for representation in a Chapter 7 bankruptcy under the following terms and conditions. I/We have signed and received a copy of the "Court Approved Retention Agreement" between Chapter 7 Debtors and their attorney as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I/We understand more than one Attorney or office personal will work on my/our case.

I/We understand the court cost of \$335.00 is not included in attorney fees. I/We also understand the cost for the credit counseling or financial management classes are not included in the attorney fees. Attorney fees are fixed (\$500.00 single & \$550.00 joint). Fees and "advance payment retainers" for pre-filing work, become property of this firm on payment and are deposited into the firm's operating account. Payments are applied to the fees. If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I/we close my file or breach this contract I agree to pay for the work done to that time. I/We assign to my/our attorney all amount tendered as filing fees or court cost and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me/us if case is not filed.

I/We understand that these fees above do not apply to, and the Attorney is not hired to represent me/us in the following: Adversary proceedings, Asset proceedings, Appeals or Proceeding in any non-bankruptcy court or administrative agency. The attorney may require additional fees allowed by the "Court Approved Retention Agreement" or other circumstances, such as any Adversary proceedings or if my case is deemed an Asset Case. If additional fees are required they will be paid up front prior to any work on these matters. I/We understand that if a motion needs to be filed to extend the Discharge to obtain a Reaffirmation Agreement in my/our case I/we will have to pay the postage and any other fees associated with this motion.

Balsley & Dahlberg Law Office is not representing me/us in state or any other courts regarding creditors in my/our bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankruptcy is my/our responsibility.

I/we must disclose any such claims or property I/we now have or acquire after filing Chapter 7 to my attorney and the court in a filed amendment and obtain authority to keep them.

I/We understand that to receive a reaffirmation agreement I/we need to be current on all payments. I/We understand the Attorney will make every attempt to obtain a Reaffirmation Agreement but cannot guarantee that we will receive one. I/We understand that Reaffirmation Agreements are voluntarily entered into, if the creditor refuses to provide a Reaffirmation Agreement there in nothing in the Bankruptcy Code to force them to prepare one. I/We agree to read my/our petition before signing it so that I/we know what is included.

(Please initial on red line below)

New If I/we have any of the following debts they will NOT be discharged: traffic/parking/tollway fines; criminal fines; student loans; educational debts/tuition; child support/maintenance; taxes; NSF criminal court; debts incurred by fraud or other debts found non-dischargeable by the Bankruptcy Court, and the holder of these will be free to pursue collection after the entry of the discharge order.

I/We also understand that if I/we received any sum of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I /we MUST notify the attorney immediately and may have to pay some or all of the funds into the Chapter 7.

I/We cannot transfer any property or incur any credit or debt without the express permission of my/our attorney or the Court, and I/We must make full disclosure of all income, expenses, debts, and assets in my/our initial consultation and on my bankruptcy petition. If I/we fail to take my financial management class that my case may be closed without discharge, and I/we well be required to pay a fee to the Attorney and the Courts to have it reopened.

| Dedud C. Zmmyn | x | |
|--|--------|----------------|
| Mildred C. Zimmerman, Debtor | • • - | , Joint Debtor |
| ×/u//// | Dated: | 12.08.15 |
| Jettry A. Daniberg Attorney for Denior (s) | _ | |
| | • | |

Case 15-83097 Doc 1 Filed 12/16/15 Entered 12/16/15 10:41:35 Desc Main Document Page 47 of 48

United States Bankruptcy Court Northern District of Illinois

| In re | Mildred C. Zimmerman | Debtor(s) | Case No | |
|-------|---|---|--------------------------------|--------------|
| | VERIFICA | ATION OF CREDITOR M | | |
| | | Number of Creditors: | | |
| | The above-named Debtor(s) hereby (our) knowledge. | verifies that the list of credi | tors is true and correct to th | e best of my |
| Date: | December 8, 2015 | /s/ Mildred C. Zimmerman Mildred C. Zimmerman Signature of Debtor | | |

Capital One P.O. Box 30285 Salt Lake City, UT 84130-0285

Chase Credit Cards P. O. Box 15298 Wilmington, DE 19850-5298

First Premier Bank P.O. Box 5524 Sioux Falls, SD 57117-5524

HSBC Card Retail P.O. Box 4169 Carol Stream, IL 60197

Main Street Acquisition Corp. c/o The Shindler Law Firm 1990 E. Algonquin Rd, Suite 180 Schaumburg, IL 60173

Midland Credit Management 8875 Aero Drive, Suite 200 San Diego, CA 92123

Portfolio Recovery Associates 120 Corporate Boulevard Norfolk, VA 23502

Velocity Investements LLC c/o Blitt and Gaines PC 661 Glenn Avenue Wheeling, IL 60090-6017